



Atty. Dkt. No. 018733-0875

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Shui-on LEUNG et al.
Title: LANDSCAPED ANTIBODIES AND
ANTIBODY FRAGMENTS FOR
CLINICAL USE
Appl. No.: 09/185,607
Filing Date: 11/04/1998
Examiner: L. Helms
Art Unit: 1642

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**NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD
OF PATENT APPEALS AND INTERFERENCES**

Commissioner for Patents
Washington, D.C. 20231

Sir:

Applicant hereby appeals to the Board of Patent Appeals from the decision of the final rejection dated 06/22/02, and the Advisory Action dated 09/16/02, of the Examiner finally rejecting Claims 1,2,4-14,16-19,21-27,29, and 38-55.

- ☒ Applicant claims small entity status.
- ☐ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:
- ☒ Notice of Appeal Fee
- ☒ To be paid as detailed below
- ☐ Not required (Fee paid in prior appeal)

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160.00 OP

The required fees are calculated below:

<input checked="" type="checkbox"/>	Notice of Appeal Fee	\$320.00
<input type="checkbox"/>	Extension month:	\$0.00
<input type="checkbox"/>	Extension:	\$0.00
	FEE TOTAL:	\$320.00
<input checked="" type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above):	\$160.00
	TOTAL FEE:	\$160.00

- ☐ Please charge Deposit Account No. 19-0741 in the amount of \$160.00 . A duplicate copy of this transmittal is enclosed.
- ☒ A check in the amount of \$160.00 is enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date April 15, 2003

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